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CONFIRMATION NO. 6814

<b>SERIAL NUMBER</b> 10/521,127	<b>FILING OR 371(c) DATE</b> 11/07/2005 <b>RULE</b>	<b>CLASS</b> 359	<b>GROUP ART UNIT</b> 2873	<b>ATTORNEY DOCKET NO.</b> U 015585-5
<b>APPLICANTS</b> Ehud Gal, Reut, ISRAEL; Gil Graisman, Reut, ISRAEL; Gennadiy Liteyga, Ashkelon, ISRAEL;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/IL03/00558 07/03/2003 <i>EP</i>				
<b>** FOREIGN APPLICATIONS *****</b> ISRAEL 150746 07/15/2002 <i>EP</i>				
<b>** SMALL ENTITY **</b>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>EP</i> Allowance Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> ISRAEL	<b>SHEETS DRAWING</b> 12	<b>TOTAL CLAIMS</b> 24
				<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> 140				
<b>TITLE</b> Optical lens providing omni-directional coverage and illumination				
<b>FILING FEE RECEIVED</b> 465	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	